

(Signature of lobbyist)

Debra Vanderbeek (Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karoutas, Leann Moccia, Chris Herr II. Name of lobbyist's partnership, firm or corporation, if any: Legislative Solutions, L.L.C. (Name of partnership, firm or corporation) P.O. Box 10724 **Bedford** 03110 Business Address: (Town/City) (Zip Code) 603-986-9145 e-mail dbeek@aol.com III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: Wheelabrator Technologies (Full Name of Client as it appears on the Lobbyist Registration Form) OR ☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 25, 2018 July 25, 2018 🔲 Reports cover: activity from date of registration to 3/31/18 activity from 4/1/18 to 6/30/18 October 31, 2018 January 30, 2019 X activity from 10/1/18 to 12/31/18 activity from 7/1/18 to 9/30/18 V. There have been no fees received and no reportable transactions made since the last report. \Box If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A-Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement ☐ If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist 1 have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. January 17, 2019

(Date)

PLEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A





I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karout	as, Leann Moccia, Chris Herr
II. Name of lobbyist's partnership, firm or corporation, if any:	
Legislative Solutions, L.L.C.	
(Name of partnership, firm or corporation)	0
III. Name of Client Wheelabrator Technologies	Date January 17, 2019
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The green reduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ 3250.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ <u>26,000.00</u>
c) Total of all fees received to date (Add lines a and b)	c) \$29,250.00
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made be may be filed for the lobbyist(s)/firm a aggregate total of all expenses paid emals purchased during a business than \$10 that is given to the person with a value of \$25.00 or less); an arting period of greater than \$25.00 for the of greater than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ <u>3250.00</u>
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) § 0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 3250.00
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>26,000.00</u>
f) Total of all expenses year to date	f) \$ 29,250.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from I period, including by whom paid or to whom charged.	obbying fees during this
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing in
(Signature of Johnvist)	January 17, 2019
(Signature of lobbyist) Debra Vanderbeek	January 17, 2019 (Date)

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying partr	ership, firm, or corpo	oration: Legislative S	olutions, L.L.C.
Name of Client (leave b	lank if Statement is fo	or the partnership, firm, or	corporation and not related to an
particular client):	Wheelabra	ntor Technologies	
Date of Report (check o	ne):		
April 25, 2018 □	July 25, 2018 □	October 31, 2018 🗆	January 30, 2019 🔀
			d Expenses described above, and imber of Addendum forms being
Addendum A(s)			
Addendum B(s)			
Addendum C(s)			
I hereby swear or affirm complete to the best of n		lief.	t and each Addendum is true and
(Signature of lobbyist)	X		(Date)
. 0	U		
Robert Clegg			
(Print Name of lobbyist)			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of	Lobbying partn	ership, firm, or corpor	ation: Legi	slative Solutions, L	L.C.
Name of	Client (leave bl	ank if Statement is for	r the partnership,	firm, or corporatio	n and not related to any
	client):		tor Technologies		_
Date of K	Report (check o	ne):			
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	wing Addendun				es described above, and Addendum forms being
X A	Addendum A(s).				
A	ddendum B(s).				
A	ddendum C(s).				
complete	to the best of m	that the foregoing inf y knowledge and beli		tatement and each January 17, 201	Addendum is true and
(Signatur	e of lobbyist)			(Dat	e)
Periklis K	aroutas				
(Print Na	me of lobbyist)				

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying partnership, firm, or corporation:		oration: Legislative S	Legislative Solutions, L.L.C.		
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to any		
particular client):	articular client): Wheelabrator Technologies				
Date of Report (check	angle				
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April 25, 2018 □	July 25, 2018 □	October 31, 2018 □	January 30, 2019 🕱		
			nd Expenses described above, and umber of Addendum forms being		
Addendum A(s	s).				
Addendum B(s	s).				
Addendum C(s).				
complete to the best of		ief.	nt and each Addendum is true and ary 17, 2019		
(Signature of lobbyist)			(Date)		
Christopher Herr		<u> </u>			
(Print Name of lobbyis	t)				

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying partn	ership, firm, or corpo	ration: Legislative So	olutions, L.L.C.
Name of Client (leave bl	ank if Statement is fo	or the partnership, firm, or o	corporation and not related to any
particular client):			
Date of Report (check of	ne):	-	
April 25, 2018 □	July 25, 2018 🗆	October 31, 2018 □	January 30, 2019 🕱
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			d Expenses described above, and mber of Addendum forms being
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
flam M		ief.	t and each Addendum is true and
(Signature of lobbyist)			(Date)
Leann Moccia (Print Name of lobbyist)			